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APPLICANTS Gary K. Michelson, Venice, CA;					
** CONTINUING DATA ***** This application is a DIV of 09/457,228 12/08/1999 PAT 6,827,740					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/20/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> not after Allowance		STATE OR COUNTRY CA	SHEETS DRAWING 7	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 2
Verified and Acknowledged Examiner's Signature _____ Initials _____					
ADDRESS 22882					
TITLE Spinal implant surface configuration					
FILING FEE RECEIVED 896	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		